Employee Engagement Strategy
2013 - 2016

Health and wellbeing through exceptional care.
Version control

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Sunshine Coast Hospital and Health Service
Employee Engagement Strategy 2013-2016

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The delivery of quality health services can only be achieved by the contribution of skilled and committed professionals, in all the various required roles. The success of the Sunshine Coast Hospital and Health Service is based on precisely such a foundation. We know the dedication, enthusiasm and expertise that you bring to your role each and every day. The services and responsiveness our patients, clients and our communities depend on would not exist without it.

Our Vision of “Health and Well Being through Exceptional Care” is underpinned by the recognition that everything we do involves people. Our Purpose is unambiguous in its commitment to and reliance on a highly skilled and valued workforce.

The development of the Employee Engagement Strategy ensures the Hospital and Health Service articulates and actively pursues its commitment to the continual enhancement of the extent and quality of that engagement.

Our workforce will be changing, increasing and developing as we journey to the opening of the Sunshine Coast University Hospital and beyond. Our commitment to valuing and respecting and engaging with our workforce will only strengthen during this exceptional period of growth. This is the purpose and promise of the Employee Engagement Strategy.

The Board and the Executive Leadership Team are determined to make the successful delivery of this Strategy a key priority. We, as without doubt you do, want to create the best possible environment in which we can support one another as we provide the services our communities depend on.

We give our personal endorsement of the Strategy and commit to doing all we can to delivering on its objectives. Your support and commitment to achieving this outcome is essential.

Professor Paul Thomas AM
Chair
Sunshine Coast Hospital and Health Board

Kevin Hegarty
Health Service Chief Executive
Sunshine Coast Hospital and Health Service
Executive Summary

The Sunshine Coast Health and Hospital Service (SCHHS) is embarking on a ten year journey which will encompass rapid capacity growth, substantial service redesign and major workforce growth and design. This will require changes in the strategy, structure, processes for the SCHHS at an organisational, work unit and individual level.

The planned service developments and change will substantially increase the workforce challenges for the SCHHS. Critical to the success of the journey is the SCHHS ability to engage with the workforce. It is therefore important that the SCHHS proactively address how it will maintain and improve employee engagement in the delivery of the vision, business strategy and operational plans.

The Employee Engagement Strategy 2013-2016 (the Strategy) identifies the issues, evidence and strategies in order for the SCHHS to maintain and enhance employee engagement at the strategic level. The strategies have been outlined as part of an Employee Engagement Strategy Action Plan based around seven key enablers:

- **Meaningful work:** articulating the link between individual jobs and organisational goals, showing how each role is important and makes a difference.
- **Voice:** employees have their views heard and included into the decision making process, consulted and communicated with over workplace issues that affect them.
- **Senior management:** creating a vision, regularly communicating that vision and future business objectives.
- **Supportive work environment:** support of peers, a sense of teamwork, and a safe environment to express opinions.
- **Person job fit:** effective job design, recruitment and selection that accurately matches skills to jobs.
- **Line management:** the key interface between the employee and the organisation.
- **Clinical engagement:** involvement in planning, delivery, improvement and evaluation of health services.

The Strategy will use these enablers to identify and recommend strategies, objectives and actions to enhance the enablers and remove barriers to engagement.
Introduction

The SCHHS vision is “Health and Well Being through Exceptional Care.”

To achieve the vision the SCHHS:

- will work for the community and be part of the community
- will provide exceptional services to ensure the community is confident in us
- acknowledges that everything we do involves people and we will ensure that they feel respected, safe, valued, listened to and that their dignity is maintained
- commit to fundamentally changing health care delivery across our health services including establishment of the new Sunshine Coast University Hospital (SCUH) as a key part of our services from 2016.

The SCHHS purpose is “to deliver the highest standards of safe, accessible, sustainable evidence based health care with a highly skilled and valued workforce that optimises the wellbeing of our community.”

Five strategic objectives have been identified that are interlinked and combine to achieve the vision and purpose.

- Care is person centred and responsive
- Care is safe, accessible, appropriate and reliable
- Care through engagement and partnerships with our consumers and community
- Care for people through sustainable, responsible and innovative use of resources
- Care is delivered by an engaged, competent and valued workforce

The SCHHS recognises the contribution of its employees as primary internal stakeholders in the delivery of the vision and purpose. There are significant implications for the workforce in achieving the vision and purposes given the changes to service scope and capacity. They include incorporating new roles and functions, potential changes in employee skills sets and ways of working or location which will reshape the employment experience over the coming few years.

There is a risk that the quantity and significance of major internal change events may have considerable impact on SCHHS employees, that resource allocation does not support the engagement effort and employees lack adequate skills to undertake engagement activities.

The purpose of the Employee Engagement Strategy 2013-2016 is to set out the issues, evidence and strategies required to deliver an increasingly engaged workforce across the SCHHS, mitigate risk and support the delivery of the services as outlined in the SCHHS Health Service Plan 2012-2026.

The SCHHS has developed this strategy to ensure appropriate actions are taken to maintain and enhance employee engagement within the workforce during this period of significant change. It is an integral part of the overall Human Resources (HR) strategy complimenting other strategies and supported by a range of plans (e.g. Recruitment Plan 2012-2017 and Retention Plan 2012-2017) and HR activities.
Employee engagement is imperative to the long term success of the SCHHS. It has the potential to influence employee retention, productivity and loyalty. In essence, employee engagement influences the discretionary effort employees are willing to apply in their work in the organisation. The attraction to organisations of the impact of employee engagement is obvious; it potentially enables the organisation to increase employee effort, organisational commitment and productivity, retain skills, and reduce turnover, absenteeism and training of new employees.

Literature surrounding employee engagement cites numerous definitions. For the purpose of employee engagement within the SCHHS the following definition is illustrative of what the SCHHS should aspire to achieve.

“Engagement is about creating opportunities for employees to connect with their colleagues, managers and wider organisation. It is also about creating an environment where employees are committed to their work and really care about doing a good job.”

“It describes the involvement of people at all levels in positive two-way dialogue and action to deliver the highest quality patient care and create great places to work - where people find their work meaningful and are willing to work together for patients, their colleagues and the future success of the organisation.”

For further literature on employee engagement including evidence for the benefits derived from high levels of employee engagement and the identification of the barriers and enablers to employee engagement; refer to appendix 1.0.

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8 Engaging for Success: enhancing performance through employee engagement” MacLeod & Clarke, 2009
Objective and Strategy Development

The objective of the strategy is to detail in an action plan format how the SCHHS will maintain and enhance employee engagement at the strategic level. It will facilitate achievement of the vision by creating a workplace where employees “feel respected, safe, valued, listened to and that their dignity is maintained.”

It will foster increased levels of employee engagement in the SCHHS as measured by the Better Workplaces Staff Opinion Survey (tool used to monitor, enhance and improve organisational culture and climate of work units) and other HR metrics such as turnover and sick leave. The Strategy was developed utilising the SCHHS project management framework with a Steering Committee established with members drawn from clinical and non-clinical service groups.

The purpose of the Employee Engagement Strategy Steering Committee was to:

- provide oversight to the Employee Engagement Strategy Project to ensure project outcomes are achieved within the allocated timeframes
- review, monitor and make recommendations to the Workforce HR Strategic Committee on the project to ensure outcomes are achieved
- endorsement and oversight of the project including:
  - decision making in relation to matters of a sensitive or extraordinary nature;
  - providing advice and counsel to management on a periodic and ad hoc basis; and
  - ensuring appropriate management and implementation of policies and decisions.
- to monitor compliance with relevant Legislation, Standards, system manager Directives and policies.

The Employee Engagement Strategy was developed giving consideration to and in accordance with the following:

- SCHHS Strategy Map 2011 - 2021
- SCHHS Strategic Workforce Plan 2011-2021
- SCHHS Employee Framework
- SCHHS Workforce Operational Plan 2011-2013
- SCHHS People & Culture Services Enabling Plan 2011-2015
- SCHHS Health Service Plan
- Health and Hospitals Network and Other Legislation Amendment Regulation (No.1) 2012
- The Australian Council on Healthcare Standards (ACHS) EQuIPNational Guidelines Standard 13, Sydney Australia; ACHS; 2012

A draft Employee Engagement Action Plan was developed through an extensive literature search and identification of best practice models, incorporating themes that captured the major enablers and barriers to Employee Engagement (appendix 2.0). This draft was validated through a comprehensive stakeholder consultation program (appendix 3.0) and a limited number of employee focus groups.
Improving clinician engagement is a major focus of current Queensland and national health reforms.

The Hospital and Health Boards Act 2011 which established the 17 Hospital and Health Services (HHS) in Queensland also requires that each HHS develop and publish a clinician engagement strategy. Part 4 of the Health and Hospitals Network and Other Legislation Amendment Regulation (NO.1) 2012 prescribes the requirements for clinician engagement strategies.

The Strategy has been developed to impact on all its employees inclusive of its clinician workforce. It is recognised that further specific actions need to be taken to demonstrate compliance with these legislative requirements, but the engagement of our clinician workforce is seen as part of our overall engagement strategy, not separate to it.

The SCHHS acknowledges that clinician engagement is an essential factor for quality improvement initiatives and the planning and coordination of health services that will achieve our aim “to deliver the highest standards of safe, accessible, sustainable evidence based health care with a highly skilled and valued workforce that optimises the wellbeing of our community.”

The intent of the Employee Engagement Strategy Action Plan (appendix 2.0) and continuation of the activities and forums identified below is to consult with our clinical workforce to support the service on:

- The improvement of the SCHHS decision making process by providing advice on all matters of interest to clinicians, to the Health Service Chief Executive (CE) and Executive Leadership Team (ELT).
- The improvement of patient outcomes by providing advice and recommendations on the local implementation of state wide clinical service initiatives that are not specialty specific.
- The improvement of health outcomes by ensuring the application of evidence-based clinical guidelines and best practice standards; quality and safety improvements; and evidence-based contemporary care models.
- The improvement of health outcomes by providing advice and recommendations reflective of local clinical and community needs and state wide priorities for service development and planning.
- The improvement of the patient journey by defining and documenting optimal care and referral pathways to promote better integrated local care across the continuum.
- Consideration of specific emerging service planning, delivery and reform issues and priorities utilising the risk management framework to inform and guide recommendations and advice.
- Promoting best practice through the dissemination of information and advice to local clinicians from the International / National and State wide networks and professional bodies.

A review of our existing clinician engagement conducted as part of the development of this strategy identified a range of opportunities that currently exist to support clinician engagement.

These include:

- **Sunshine Coast University Hospital (SCUH)**
  The SCHHS has been actively preparing and planning for the transition to the Sunshine Coast University Hospital (SCUH) in 2016. This has included extensive consultation with clinicians and non-clinicians through a variety of forums including the G8 and G48. The G8 is a multidisciplinary group of senior clinicians and non-clinicians. The G48 is a group of 48 clinicians that represent the “hands on” work force. Their input is fed up through their individual service line leaders to the representatives of the G8. Involvement has included clinical area design, service planning, and models of care and service delivery.
• **Excellence in Clinician-Led Improvements in our Patient’s Experience (ECLIPsE) Project**
The Excellence in Clinician-Led Improvements in the Patient’s Experience (ECLIPsE) project was a whole of organisation patient-flow redesign project based at Nambour General Hospital. The aim was to improve patient flow across the organisation. The project team focused on collaborating with the Department of Emergency Medicine, Operating Theatres and Bed Management and supported and led the implementation of agreed strategies to improve service delivery.
A framework of accountability was determined in which Action Teams (comprised of clinical experts) were established to develop and implement agreed changes. Each action team reports to a Responsible Lead who then reports to the Accountable Owner or Steering Committee. This clinically led structure continues to function and monitors progress of each Action Team.

• **Clinical Leadership Group (CLG)**
The SCHHS has an established Clinician Leadership Group as a forum for the strategic engagement of clinicians, offering the opportunity to have formal input into the SCHHS decision making process. Membership is via self-nomination (eligibility is determined by the Chief Executive to ensure the group has representation from all clinical streams) and the chair of the CLG is also a member of the Executive Leadership Team. The role of the group is to contribute to the management and delivery of health services by responding to needs and influencing decision-making.

• **Development of service plans / profile and operational plans**
Service plans/profiles and operational plans are developed annually by Service Line management groups. All staff are invited to participate in the development of these plans.

• **State-wide / Nationally:**
Clinical Networks were established across Queensland in early 2006. There are a number of networks consisting of multi-disciplinary membership that represents the broad and diverse service providers across the state and engages clinicians in strategic and operational health service initiatives. There are also a number of state-wide projects, advisory groups and programs that utilise a similar clinician advisory structure such as the Falls Collaborative, Informed Consent Advisory Group, Queensland Institute of Clinical Redesign and Medication Safety Queensland. The SCHHS has a significant number of staff represented on these various networks and collaborative groups.
A fundamental element of the Strategy is that these avenues for clinician engagement would continue and be further enhanced by the actions identified within the action plan under the clinician engagement theme.
Employee Engagement:

The Better Workplace Staff Opinion Survey 2011 results indicated that most measures recorded improvement. Measures of Employee Engagement, Peer Support, Role Clarity, Workplace Health & Safety, Multidisciplinary Team Support for Patient Care, and Clinical Communication were commendably high. There was however elements within each of these measures that were noted as requiring attention.

The measures of Feeling Involved, Communication and Trust in Executive were identified as key focal points for intervention. The recommended focus points for intervention from the survey have been considered when identifying and prioritising actions within the Employee Engagement Strategy Action Plan.

The Current State

The Better Workplace Staff Opinion Survey 2011 results indicated that most measures recorded improvement. Measures of Employee Engagement, Peer Support, Role Clarity, Workplace Health & Safety, Multidisciplinary Team Support for Patient Care, and Clinical Communication were commendably high. There was however elements within each of these measures that were noted as requiring attention.

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Intervention

As identified in previous sections, there is a range of factors that act to impede or enable employee engagement and all should be included in a comprehensive employee engagement strategy. Not all factors though impact equally on employee engagement. The Chartered Institute of Personnel and Development (CIPD) concluded\(^2\) that the two factors of Meaningfulness of Work and Employee Voice are more important than any other factors in driving up levels of engagement. Leadership communication and vision is the next most important factor.

The impact of leadership actions is supported by a BlessingWhite\(^3\) report which concluded that trust in executives can have twice the impact on engagement levels than trust in immediate manager, and that executives in organisations surveyed in the report did not appear to be creating working environments that supported achievement of high performance.

Strategic Actions

Based upon the employee engagement issues identified in the previous sections, and through consultation with key stakeholders and employee focus groups the SCHHS has adopted seven strategic enablers and associated actions to address employee engagement over the next two years.

Employee Engagement Strategy Action Plan (appendix 2.0) indicates the strategic actions that the SCHHS commits to implement and achieve to ensure that “everything we do involves people and we will ensure that they feel respected, safe, valued, listened to and that their dignity is maintained”, in delivering our vision of “Health and Well Being through Exceptional Care”.

The Employee Engagement Strategy will be made available to the public by being placed on the SCHHS website. All actions will be continuously evaluated and adjusted as required, and the Employee Engagement Strategy will be completely reviewed within 3 years.

The principal measure of the effectiveness of the Employee Engagement Strategy will be the bi-annual Better Workplace Staff Opinion Survey which includes a specific measure of employee engagement. The results of this survey are posted on the SCHHS website.

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\(^2\) “Creating and Engaged Workforce” CIPD Research Report 2010
\(^3\) “Employee Engagement Report 2011” BlessingWhite Inc. 2011
Appendix 1.0: Employee Engagement

1. What is Employee Engagement?

The literature surrounding employee engagement provides reference to numerous definitions. Drawing on diverse relevant literatures, the following definitions are illustrative of employee engagement.

“Engagement is about creating opportunities for employees to connect with their colleagues, managers and wider organisation. It is also about creating an environment where employees are motivated to want to connect with their work and really care about doing a good job...It is a concept that places flexibility, change and continuous improvement at the heart of what it means to be an employee and an employer in a twenty-first century workplace.”

“A positive attitude held by the employee towards the organisation and its values. An engaged employee is aware of the business context, and works with colleagues to improve performance within the job for the benefit of the organisation. The organisation must work to develop and nurture engagement, which requires a two-way relationship between employee and employer.”

“A set of positive attitudes and behaviours enabling high job performance of a kind which are in tune with the organisation’s mission.”

From a health service perspective the following definition is more targeted. “Employee engagement describes the involvement of people are all levels in positive two-way dialogue and action to deliver the highest quality patient care and create great places to work - where people find their work meaningful and are willing to work together for patients, their colleagues and the future success of their organisation.”

In relation to our clinician workforce which includes “any individual who provides diagnosis or treatment as a professional medical practitioner, nurse, allied health practitioner or other health practitioner”, clinician engagement is defined as “The manner in which SCHHS involves clinicians in the planning, delivery, improvement and evaluation of health services”.

Employee Engagement essentially describes what happens when people think and act in a positive way about the work they do, the people they work with and the organisation they work in.

Despite the numerous definitions in the literature, employee engagement has a number of consistent elements:

- A two-way interaction between the employee and the organisation for which the organisation has the responsibility to take the lead
- A multitude of characteristics of an engaged workforce that include commitment, pride and advocacy, a connection with the organisation’s strategy, and the demonstration of discretionary effort on the part of the engaged employee
- Effective relationships that are based on mutual trust, respect and understanding
- Two-way communication characterised by openness and honesty
- Understanding of and commitment to the organisations vision
- The literature has identified a number of drivers of engagement but there is no template solution.

While these elements may be similar across organisations and industry settings, what they look like in practice and how an organisation creates employee engagement will be unique. The focus should not be about identifying one all-encompassing definition, but more about implementing strategies that impact positively on the level of employee engagement.

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4 “Engaging for Success: enhancing performance through employee engagement” MacLeod & Clarke, 2009
6 “Clinician Engagement Framework for Hospital and Health Services” Queensland Health May 2012
7 “The development of the APS Employee Engagement Model”. Australian Public Service Commission
2. Why is Employee Engagement Important?

The link between employee engagement and organisation performance has been debated for a number of years, but there is a growing evidence base that effective employee engagement is related to overall business performance that depends on discretionary effort, creative thinking and continuous innovation throughout the workforce. A recent comprehensive review of the evidence on the impact of employee engagement concluded that:

“The relationship between engagement and performance at the business unit level is substantial and highly generalizable across companies. The data from the present study provide further substantiation to the theory that doing what is best for employees does not have to contradict what is best for the business or organisation”. 8

The research literature and case studies indicate that engaged employees can deliver:

- higher productivity and organisational performance
- improved customer focus
- lower levels of absenteeism
- higher retention
- greater innovation. 9

Within the health sector, improving levels of employee engagement has potential to:

- help connect clinicians with the organisation as well as the professional agenda and take on leadership roles
- focus staff on taking a proactive approach to improvement in quality of service
- support the approach to managing change.10

The evidence that this potential is being realised is emerging from a number of research studies that show where staff engagement levels are high, scores are also significantly higher for patient satisfaction and lower for standardised hospital mortality rates. 11

According to PricewaterhouseCoopers,12 nine out of ten of the key barriers to the success of change programs are people related, so having an engaged workforce will be a critical element in addressing the SCHHS changes and challenges.

9 “Creating an Engaged Workforce” CIPD Research Report 2010
11 “Engaging your staff: the NHS staff engagement resource” NHS 2012
12 Cited in “Engaging for Success: enhancing performance through employee engagement” MacLeod & Clarke 2009
3. What are the barriers to Employee Engagement?

The factors in an organisational environment that can disable employee engagement are numerous and varied. Key barriers include:

- Reactive decision-making that fails to address problems in time;
- Inconsistent management style, based on the attitudes of individual managers which leads to perceptions of unfairness;
- Lack of fluidity in communications and knowledge sharing, due to rigid communication channels or cultural norms;
- Low perceptions of senior management visibility and quality of downward communication; and
- Poor work-life balance due to long hours of work culture.13

Despite the relatively high profile of employee engagement in the HR environment, among leaders and managers the level of understanding is low. Barriers to effective employee among leaders and managers fall into four broad categories.

- Some leaders are not aware of employee engagement. Others do not believe that it is worth considering, or do not fully understand the concept and the benefits it could have for their organisation.
- Others who are interested in the topic do not know how to address the issue.
- Even when leaders place great emphasis on the idea of employee engagement, managers may not share the belief, or may be ill-equipped to implement engagement strategies. As a result the organisational culture is unable to deliver engagement.
- Among those leaders who are concerned with employee engagement, there is great variability in their views and commitment to it. Often the potential of employee engagement is underestimated. For some, engagement is an annual staff survey whose results may be acted on; for others a survey is no more than one tool in an overall approach that places employee engagement at the core of the organisation’s strategy.14

In developing an employee engagement strategy, actions to raise awareness, capability and commitment among the organisations leaders and managers is a crucial component that unless addressed can undermine enabling actions introduced to enhance engagement levels.

13 “An HR directors guide to employee engagement” CIPD 2009, p.5
14 “Engaging for Success: enhancing performance through employee engagement” MacLeod & Clarke 2009
4. What are the Employee Engagement enablers?

There is no ‘one size fits all’ model of engagement, a template solution that can be adopted by all organisations to address employee engagement. Any initiatives taken to address employee engagement must be part of a SCHHS wide strategy, tailored to address the services unique situation and circumstances if sustainable employee engagement is to be enabled across the whole service.

There are a number of factors that need to be addressed to enhance employee engagement, and the published literature identifies a wide variety of factors that impact on employee engagement. Despite the large variety of factors, more recent studies commonly cite a smaller number of broad enablers and/or drivers as being critical to employee engagement.

- **Meaningful work**: Articulating the link between individual jobs and organisational goals, showing how each role is important and how it makes a difference. The extent to which employees find meaning in their work impacts on their attitude to working life in general.
- **Employee voice**: An effective and empowered employee voice means employees’ views are sought out; they are listened to and see that their opinions count and make a difference. They speak out and challenge when appropriate. A strong sense of listening and of responsiveness permeates the organisation, enabled by effective communication.
- **Leadership**: Leaders should provide a strong strategic narrative which has widespread ownership and commitment from managers and employees at all levels. The narrative is a clearly expressed story about what the purpose of an organisation is, why it has the broad vision it has, and how an individual contributes to that purpose.
- **Engaging Line Managers**: are at the heart of employee engagement. They facilitate and empower rather than control or restrict their staff; they treat their staff with appreciation and respect and show commitment to developing, increasing and rewarding the capabilities of those they manage.
- **Supportive work environment**: Support of peers, a sense of teamwork and a safe environment to express opinions are the features of a supportive work environment.
- **Person job fit**: Effective job design, followed by an effective recruitment and selection process that accurately match skills, knowledge and attitude of the individual to jobs and the organisation.

15 “Corporate Leadership Council: Driving Performance and retention Through Employee Engagement 2004
16 “Engaging for Success: enhancing performance through employee engagement” MacLeod & Clarke 2009
17 “Creating an Engaged Workforce” CIPD Research Report 2010
## Appendix 2.0:

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<th>ELT Sponsor</th>
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<td><strong>Meaningful Work</strong></td>
<td></td>
<td>Reform the current SCHHS performance appraisal and development process to provide a more clear link between the SCHHS Strategic Plan and the employees’ individual plan.</td>
<td>To be determined (TBD)</td>
<td>ED P&amp;C</td>
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<td>Further promotion and communication of the SCHHS Leadership Principles to express the story about the purpose of the HHS and how an employee can contribute to that purpose.</td>
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<td>Increased support will be provided to line managers in translating whole of SCHHS Strategic Intents and KPIs into meaningful tasks and duties for teams and individuals.</td>
<td>TBD</td>
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<td><strong>Employee Voice</strong></td>
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<td>Existing staff communication mechanisms will be reviewed to create more opportunities for interaction between ELT, management and employees.</td>
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<td>In addition to the bi-annual Better Workplaces Survey, employee opinion will be assessed in other ways such as pulse surveys and in-depth focus groups.</td>
<td>TBD</td>
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<td>Utilise the Aboriginal and Torres Strait Islander Workforce Advisory Group to provide expert advice on improving recruitment, retention and career development opportunities for the current and future Aboriginal and Torres Strait Islander workforce.</td>
<td>TBD</td>
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<td>Creation of electronic communication mechanisms (email, website, blog) that allow a platform for employees to easily feedback their thoughts on the day-to-day operations of the Health Service.</td>
<td>TBD</td>
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<td>Develop a network of employees with the objective to make Better Workplaces a part of everyone’s day to day activities. This network will monitor, revise strategies and offer feedback to improve workplace culture.</td>
<td>TBD</td>
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<td>Expanding the practice of Leadership rounding to all Executive and Senior Managers to all facilities/services/units e.g. Visitation pyramid used in Productive Ward.</td>
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<td>Implement an ‘Employee Bright Ideas Program’ to encourage and harvest employee generated ideas on how to improve the Health Service.</td>
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<td><strong>Engaging Line Managers</strong></td>
<td>The capability of current and future managers will be enhanced to enable effective management of all employees within SCHHS</td>
<td>Undertake a management capability audit across the SCHHS to identify areas of strength and weaknesses and to align future development investment.</td>
<td>TBD</td>
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<td>Develop management capability and capacity across the SCHHS through enhanced education and training programs for current and future managers.</td>
<td>TBD</td>
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<td>Accountability for increasing employee engagement will be incorporated into the performance management review process.</td>
<td>TBD</td>
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<td>December 2013</td>
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<td>Managers will be provided with change management skills training to support Employee Engagement implementation.</td>
<td>TBD</td>
<td>ED P&amp;C</td>
<td>June 2013</td>
</tr>
<tr>
<td><strong>Leadership</strong></td>
<td>The capability of current and future managers will be enhanced to enable effective management of all employees within SCHHS</td>
<td>The Executive Leadership Team (ELT) will seek to ensure employee engagement is a key performance indicator for the SCHHS and each Service Group.</td>
<td>TBD</td>
<td>ED P&amp;C</td>
<td>June 2013</td>
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<td></td>
<td></td>
<td>The Service Groups will include relevant employee engagement actions in operational plans as identified and prioritised by the Employee Engagement Strategy.</td>
<td>TBD</td>
<td>ED P&amp;C</td>
<td>December 2013</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The Sunshine Coast Health and Hospital Service (SCHHS) vision and values will be communicated and incorporated into workplace processes and practices.</td>
<td>TBD</td>
<td>ED P&amp;C</td>
<td>June 2013</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The development of an Employee Recognition Program aligned to the SCHHS vision.</td>
<td>TBD</td>
<td>ED P&amp;C</td>
<td>December 2013</td>
</tr>
<tr>
<td></td>
<td></td>
<td>THE ELT and management across the Health Service will clearly articulate a responsibility for Employee Engagement and that responsibility will be included in position descriptions.</td>
<td>TBD</td>
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<td></td>
<td></td>
<td>The Strategic Planning Framework to incorporate collaboration and engagement of employees at all levels of the Health Service in the development and ongoing review.</td>
<td>TBD</td>
<td>ED S&amp;P</td>
<td>June 2014</td>
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<td></td>
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<td>Executive and senior managers to have a more visible profile by attendance at Service Group and other group meetings, and by promoting their roles.</td>
<td>TBD</td>
<td>ED P&amp;C</td>
<td>June 2013</td>
</tr>
<tr>
<td>Theme</td>
<td>Objective</td>
<td>Actions</td>
<td>Responsible Officer</td>
<td>ELT Sponsor</td>
<td>Time-frame</td>
</tr>
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<tr>
<td>Supportive Work Env.</td>
<td>Support of peers, a sense of teamwork and a safe environment to express opinions</td>
<td>Appointments to leadership roles will be based in part on the candidate’s ability to build a highly engaged team, by having this element included in the selection criteria. SCHHS will identify, adopt and support best practice process improvement initiatives such as Productive Ward to support employee engagement. Implement actions from Employee Retention Plan 2012-2017. The celebration of ‘good news stories’ highlighting the positive contribution employees have made to the team and the work environment. Support managers to understand and meet the communication expectations of their staff through the implementation of Employee Engagement tools.</td>
<td>TBD</td>
<td>ED P&amp;C</td>
<td>December 2013</td>
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<tr>
<td>Person Job Fit</td>
<td>Recruitment and selection that accurately matches skills, knowledge and attitude to job and organisation</td>
<td>Implement action from Employee Recruitment Plan 2012-2017. Development of an organisation handbook of values that lists behaviours against the values and is utilised for selection, promotion and performance management.</td>
<td>TBD</td>
<td>ED P&amp;C</td>
<td>As per Recruitment Plan</td>
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<tr>
<td>Clinical Engagement</td>
<td>Involvement in planning, delivery, improvement and evaluation of health services</td>
<td>Continue utilising the Clinician Leadership Group (CLG) as a forum for the strategic engagement of clinicians offering the opportunity to have formal input into the Health Services decision making process. Review communication methods to ensure the outcomes and other information from CLG reach all other clinicians. Establishment of a Clinician Advisory Council between the SCHHS, the Medicare Local and other Government and non-government partners to foster collaboration and engagement across the continuum. Devolve greater accountability and autonomy to clinicians for establishing service goals, resource allocation, and evaluating and improving service performance.</td>
<td>TBD</td>
<td>ED S&amp;P</td>
<td>December 2013</td>
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</tbody>
</table>
Appendix 3.0: Stakeholder Consultation

<table>
<thead>
<tr>
<th>Stakeholder Group</th>
<th>Purpose</th>
<th>When</th>
<th>Communication method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Leadership Group</td>
<td>Provide input, information and feedback to the Employee Engagement Strategy Action Plan</td>
<td>31 October 2012</td>
<td>PowerPoint: Presentation</td>
</tr>
<tr>
<td>Nursing Management Leadership Team</td>
<td></td>
<td>24 September 2012</td>
<td>PowerPoint: Presentation</td>
</tr>
<tr>
<td>Allied Health Leadership Team</td>
<td></td>
<td>24 September 2012</td>
<td>PowerPoint: Presentation</td>
</tr>
<tr>
<td>Medical Directors Meeting</td>
<td></td>
<td>28 September 2012</td>
<td>Discussion</td>
</tr>
<tr>
<td>People and Culture Leadership Team</td>
<td></td>
<td>12 September 2012</td>
<td>PowerPoint Presentation</td>
</tr>
<tr>
<td>Clinical Support Services Governance Committee</td>
<td></td>
<td>28 September 2012</td>
<td>Email circulated to Senior Leaders</td>
</tr>
<tr>
<td>Community Integrated and Sub-Acute Service Senior Leaders Meeting</td>
<td></td>
<td>28 September 2012</td>
<td>Email circulated to Senior Leaders</td>
</tr>
<tr>
<td>Planning Capacity and Development Team</td>
<td></td>
<td>20 September 2012</td>
<td>PowerPoint Presentation</td>
</tr>
<tr>
<td>Aboriginal and Torres Strait Island Group</td>
<td></td>
<td>4 September 2012</td>
<td>Discussion</td>
</tr>
<tr>
<td>Caloundra Health Service Clinical Governance Committee</td>
<td></td>
<td>28 September 2012</td>
<td>Email circulated to Senior Leaders</td>
</tr>
<tr>
<td>Gympie Nursing Management Meeting</td>
<td></td>
<td>3 October 2012</td>
<td>PowerPoint Presentation</td>
</tr>
<tr>
<td>Maleny Soldiers Memorial Hospital Management Meeting</td>
<td></td>
<td>9 October 2012</td>
<td>Email circulated to Senior Leaders</td>
</tr>
<tr>
<td>Culture Group</td>
<td></td>
<td>9 October 2012</td>
<td>Email circulated to a cross section of employees from different facilities within the Health Service</td>
</tr>
</tbody>
</table>